FBI Name Checks for Fingerprint Submissions Rejected Twice Due to Image Quality

When can I request a Name Check?

Name Check can be requested when the fingerprints have been rejected twice for image quality by the FBI's Criminal Justice Information Services (CJIS) Division.

Who can request a Name Check?

The Name Check is limited to state, federal, and regulatory agencies that already have legal authority to submit fingerprints for non-criminal justice purposes.

If you have submitted fingerprints as part of the Departmental Order Process, please refer to this site: www.fbi.gov/about-us/cjis/identity-history-summary-checks

How do I get the Name Check procedure started?

- Complete the attached Name Check request form
- Mail, fax or, email the form to:

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FBI CJIS Division

Tax (304) 625-5102

Attn: Name Check Request 1000 Custer Hollow Road Clarksburg, WV 26306

OR via the Internet



CKNAMECHECK@IC.FBI.GOV

Complete the attached NAME CHECK request form and email to this address

What do I need to include with my Name Check request?

- The Transaction Control Number(s) [TCNs], name, date of birth, and social security number (if available) from the rejected fingerprint submissions.
- The Originating Agency Identifier (ORI) of the agency and corresponding address.
- Contact information for the agency including agency preference for receipt of the results, either by fax, email or mail.

NOTE If candidates are generated during the Name Search and the candidates are identified to an existing criminal record, agencies will be provided with copy of the criminal history record.

Is there a time limit for obtaining these Name Checks?

Yes. The Name Check request must be submitted within 90 days of the last rejection date. The first rejection must be within 1 year prior to the second rejection

Who can I contact if I have further questions about the Name Check process?

Should you have any questions, please contact the Biometric Services Section (BSS) Customer Service line at (304) 625-5590 between the hours of 8:00 a.m. and 5:00 p.m. Eastern Standard Time, Monday through Friday. You may also call the Name Check informational line at (304) 625-9450 that will provide you with the date that the FBI is currently processing as we process in order received.

CJIS NAME CHECK REQUEST (Please type or print clearly)

* Adoption * Foster Care/Child Placeme * Other (employment, licens	ent ing, etc)		
Please complete the attached form to fingerprints must be rejected twice for	-		
*ORI of State/Federal/Regulatory A	gency:		
*Your agency's point of contact (PC	OC) for the response:		
*Phone number of POC:			
CHOOSE YOUR PREFER	RRED METHOD OF REC	CEIVING RESPO	ONSES:
*Fax number of POC:			
Email address:			
US Postal Service: If you choose to corresponding ORI address below or your Name Check will be returned.	. This address must mate		
*Name and address of requesting a Name: Address:			
PLEASE COME	PLETE ALL OF THE AB	OVE FIELDS	
	Subject of Name Check		
*Two NCN's (E#s) of the subject's	s fingerprint submission:		
(1)	(2)		
*Name:	*Alias:		
*Date of Birth:	Place of Birth:	*Sex:	_*Race:
*Social Security Number:	Miscel	aneous Number:	:
State Identification Number:	OCA:		
(D)	11 · 10 N		n a

Please note that the asterisked fields are required for Name Check searches—all other fields are optional, the results provided will be the result of the biographic information included in the original fingerprint submission.